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APPLICANTS  
 Daniel L. Mork, Edgewater, MD;

\*\* CONTINUING DATA \*\*\*\*\* *None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>XS</i>	STATE OR COUNTRY MD	SHEETS DRAWING 3	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 2
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ADDRESS  
 24932  
 LAUBSCHER SEVERSON  
 1160 SPA RD  
 SUITE 2B  
 ANNAPOLIS , MD  
 21403

TITLE  
 Food and exercise calculator

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